



### PRESIDENT'S MESSAGE



Local 5135 HPAE members:

#### STOP THE PROPOSED CUTS TO OUR PERS AND HEALTH PLANS

**On June 13<sup>th</sup> all the public sector unions will be in Trenton for a rally opposing the proposed bills that will reduce the PERS benefit for members who have not vested in the plan and that will shift more medical costs to all of us. Enough!**

**Plan now for a day of lobbying and rallying. Save the date and catch our bus to Trenton!**

See more information at [www.hpae.org](http://www.hpae.org)

If you have any specific questions about the contract, feel free to email me, so that we can answer the questions during the General Membership meetings. I can be reached by email is [sbrovr@aol.com](mailto:sbrovr@aol.com). Home 732-502-0048 or my cell 848-459-6588, ACWYCF 609-298-0500 ext. 1451 Monday – Friday



### Vacation Requests

Please remember to submit vacation requests in timely manner. This will prevent any disagreements with management. Please check your leave balances to make sure that time is accruing correctly. If you notice a discrepancy, please report it immediately to Human Resources Stephanie Plaskow.

### May 22, 2019 Bargaining Update for Rutgers University:

We met with Rutgers today with the goal of moving our contract to a settlement. We have been diligently working to settle the contract that would merge our two contracts together and create one nursing bargaining unit, as it always should have been.

After working for four hours on a counter proposal to the university that is based off of merging both contracts into one, Rutgers management refused to counter our contract proposals and threatened to end the joint bargaining table and our efforts to merge the contracts.

We fought back and called Rutgers out on this tactic. We only began Registered Nurses bargaining 4/17/19 after the 5135 local did not meet with Rutgers since December 2018. We have put in massive time and effort in each session to merge the contracts and complete our negotiations for our Registered Nurses.

Rutgers continues to push back against incorporating the UCHC nurses into basic contract terms such as Education Differential and Preceptor Pay claiming the wage increases from moving 5135 into the UB should be enough. We disagree and have continued to declare that no nurse should be treated differently than another based on his/her work location.

Rutgers stated this negotiation for the Registered Nurses began because the University finally recognized the UBHC nurses deserve to be treated the same as all other nurses at Rutgers University. We pointed out to the entire Rutgers committee that creating carve outs for one particular group is not treating all nurses the same.

Our next bargaining date is Tuesday, June 4th.

In Solidarity,

**5089 Bargaining Team:** Janice Fitzgerald, Bruno Beja-Umukoro, Jennifer Lerner, Brandy Macko

**5135 Bargaining Team:** Sabrina Brown-Oliver, Edith Feldman, Marsha Lauriano, Joe Bentivegna, Denise Johnson, Ulric Kelly, Dawn Raabe, Debbie Schaal, Carol Milroy, Lucia Otti, Francine Pasch, Jane Aldershoff, Elizabeth Ilukwe, Ito (Peace) Ekpo, Lorna Beaumont

## HPAE Forefront

### Nurse Staffing: Give Them a Break, and Adequate Help

Asbury Park Press

By Debbie White, HPAE Executive President

May 7, 2019

In New Jersey, nurses are advocating for legislation to set safe staffing levels to ensure nurses are not caring for too many patients. As a patient, what was your hospital experience when your nurse was stressed and overwhelmed? The direct link between safe patient care and safe nurse staffing limits is clear from the studies and from 15 years of experience in California.

When nurses are caring for too many patients, we see higher infection rates, higher rates of re-admission and even higher mortality rates. Short staffing also sends nurses from the bedside, into other jobs, or into retirement, something we cannot afford as our population ages. And just like the exhaustion from a lack of breaks, medical errors are more likely to take place, when nurses are working short staffed as well.

Is this what we have come to expect of our nurses and other frontline health professionals? And do our patients deserve to be cared for by nurses who work 12-hour shifts without breaks and are trying to keep every patient safe no matter how many they are assigned to care for during that shift?

Nevertheless, hospital management, nurse executives and industry lobbyists continue to argue against setting safe patient limits, ignoring not only the evidence, but ignoring the voices of nurses everywhere, who overwhelmingly support laws setting safe patient limits. Nurses know how unsafe it is to care for too many patients. They are the experts in their fields. But even if administrators do not want to listen, there is a wealth of information showing the connection between safe staffing and better patient outcomes based on multiple studies.

The proposed New Jersey law establishes a base-line safe limit on the number of patients one nurse can care for — with adjustments for a patient's illness (called acuity) and his or her need for nursing care. The sicker the patient, the higher the acuity.

New Jersey hospitals must already comply with long-standing regulations setting "ratios" or limits in specialized hospital units, like Intensive Care Units (ICUs). Those limits save lives everyday — but even these current limits (one R.N. to three patients, for example) are outdated and inadequate for today's more critically ill patients. We know that the critical care patients of today have a much greater acuity than years past.

In many unionized hospitals, staffing limits work well, and nurses have a voice in patient care decisions. Nursing unions like HPAE, JNESO, NJNU/CWA, NYSNA, and USW are leading the way in fighting to save lives — and to keep nurses at the bedside. That's why we are fighting for legislation and initiatives that would put safe patient limits into law.

New Jersey's bill, sponsored by Sen. Joe Vitale, D-Middlesex, and Assemblyman Daniel Benson, D-Mercer-Middlesex, reflects both the science and experience of bedside nurses who day in and day out take care of the sickest among us. We believe every patient, in every hospital, deserves the same high level of care their illness demands, just as nurses should know that when they come to work, they will be able to deliver quality care to all patients.

This long drawn-out fight over safe staffing levels has chased many nurses away from our profession. The argument against safe patient limits pushed by hospital CEOs diminishes the voices and values of nurses. Call your state representatives to urge them to listen to NJ's nurses. The problem is under staffing, and the solution is safe patient limits. It's time for the legislature to move forward with legislation setting safe patient limits that give nurses the tools they need to keep their patients safe.